

ATTACHMENT #4

FEDERAL EMPLOYEE TRANSPORTATION SURVEY REPORT

1. Facility Name and Address					2. Person preparing report (Name, title, agency) (Employee Transportation Coordinator) (Telephone Number (area code))			
3. Facility Survey Results								
a. Agency	b. Total employees at facility	c. Number responded	d. Drive alone	e. Carpool	f. Vanpool	g. Privately leased bus	h. Mass transit	i. Other (Bicycle, walking, etc.)
TOTALS								
PERCENTAGE								